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23850 7590 07/06/2005

ARMSTRONG, KRATZ, QUINTOS, HANSON & BROOKS, LLP

1725 K STREET, NW
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09/30/2005 MBEYENE2 00000091 10634840

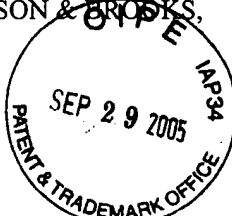
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01 FC:1501 1400.00 OP
 02 FC:1504 300.00 OP
 03 FC:8001 12.00 OP



APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/634,840	08/06/2003	Yoshiaki Sakamoto	020755A	8607

TITLE OF INVENTION: METHOD OF MANUFACTURING AN INK JET HEAD HAVING A PLURALITY OF NOZZLES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	10/06/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
NGUYEN, TAI V	3729	029-890100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Armstrong, Kratz,
 2 Quintos, Hanson &
 3 Brooks, LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

FUJI PHOTO FILM CO., LTD.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Minami-Ashigara-shi, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 4

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- ☒ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 01-2340 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date September 29, 2005

Typed or printed name Daniel A. Geselowitz, Ph.D.

Registration No. 42,573

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